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|--|------------------------|--|
| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><br>(Only for new nonprovisional applications under 37 CFR 1.53(b)) | Attorney Docket No.    | 537.010  |
|  | First Named Inventor   | MARK J. CUDDEBACK ET AL.   |
|  | Title                  | ENCLOSURE FOR WILDLIFE SURVEILLANCE SYSTEM AND SECURITY APPARATUS THEREFOR |
|  | Express Mail Label No. | EV313041378US  |

|   |   |
|---|---|
| <b>APPLICATION ELEMENTS</b><br><br>See MPEP chapter 600 concerning utility patent application contents. | <b>ADDRESS TO:</b> MAIL STOP - PATENT APPLICATION<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450 |
|---|---|

1. (X) Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)
2. (X) Applicant claims small entity status  
See 37 CFR 1.27
3. (X) Specification [Total Pages - 15]  
(preferred arrangement set forth below, MPEP 1503.01)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claims
  - Abstract of the Disclosure
4. (X) Drawing(s) (35 U.S.C. 113) [Total Sheets 4]
5. ( ) Oath or Declaration [Total Pages \_\_\_\_]
  - a. ( ) Newly executed (original or copy)
  - b. ( ) Copy from a prior application (37 CFR 1.63 (d))  
(for continuation/divisional with Box 16 completed)
  - i. ( ) **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63 (d)(2) and 1.33 (b).
6. ( ) Application Data Sheet. See 37 CFR 1.76
7. ( ) CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. ( ) Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

- a. ( ) Computer Readable Form (CRF)
- b. ( ) Specification Sequence Listing on:
  - i. ( ) CD-ROM or CD-R (2 copies); or
  - ii. ( ) paper
- c. ( ) Statement verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9. ( ) Assignment Papers
10. ( ) 37 CFR 3.73(b) Statement ( ) Power of Attorney  
(when there is an assignee)
11. ( ) English Translation Document (if applicable)
12. ( ) Information Disclosure Statement (IDS)/PTO-1449 ( ) Copies of IDS Citations
13. ( ) Preliminary Amendment
14. (X) Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ( ) Certified Copy of Priority Document(s)  
(if foreign priority is claimed)-Japan 2002-327137
16. ( ) Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i) - Applicant must attached form PTO/SB/35 or its equivalent
17. ( ) Other: \_\_\_\_\_

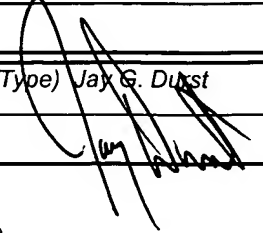
16. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

(X) Continuation ( ) Divisional ( ) Continuation-in-part (CIP) of prior application No: 10/237,642  
Prior application information: Examiner D.S. Larkin Group / Art Unit: 2856

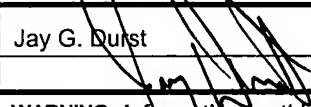
For **CONTINUATION** or **DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**17. CORRESPONDENCE ADDRESS**

|   |                         |   |                |  |                |
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| <input checked="" type="checkbox"/> Customer Number or Bar Code Label |                         | (Insert Customer No. or Attach bar code label here) |                | or <input type="checkbox"/> Correspondence address below |                |
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|   |  |
|---|--|
| Name (Print/Type) Jay G. Durst  | Registration No. (Attorney/Agent) 41,723 |
| Signature  | Date January 13, 2004                    |

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| FEE TRANSMITTAL<br>for FY 2004   |          |   |          | Complete if Known  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
|--|----------|---|----------|--|----------|--------------------------|--|-----------------|----------|--------------|----------|----------|----------|----------|----------|----------|----------|-----|-----|------------------------|--------|-----|-----|-------------------------------------|-----|-----------------------------------|----|-----|-----|--|-----|---------------------------------------|-----|-----|-----|---------------------------|-----|---|-------|-----|-------|--|----|---|------|--|------|--|--|-----|--------|-----|--------|---|--|-----|-----|-----|----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|-----|-------|-----|-----|---|--|-----|-------|-----|-----|--|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|--------------------------|--|-----|-------|-----|-------|---|--|-----|-----|-----|----|----------------------------------|--|-----|-------|-----|-----|------------------------------------|--|-----|-------|-----|-----|--------------------------------|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|-----------------|--|-----|-----|-----|-----|-------------------------------|--|-----|----|-----|----|-------------------------------------|--|-----|-----|-----|-----|---|--|-----|----|-----|----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|---|--|
| Patent fees are subject to annual revision.  |          |   |          | Application Number   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
|  |          |   |          | Filing Date  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
|  |          |   |          | First Named Inventor   |          | Mark J. Cuddeback et al. |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
|  |          |   |          | Examiner Name  |          | David B. Gray            |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
|  |          |   |          | Group Art Unit   |          | 2851                     |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
|  |          |   |          | Attorney Docket No.  |          | 537.010                  |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| <b>TOTAL AMOUNT OF PAYMENT</b> \$ 403.00   |          |   |          |  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| METHOD OF PAYMENT (check all that apply)   |          |   |          | FEE CALCULATION (continued)  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><br><input type="checkbox"/> Deposit Account<br>Deposit Account Number: 50-1170<br>Deposit Account Name: Boyle, Fredrickson, Newholm, Stein & Gratz S.C.<br><br><b>The Commissioner is authorized to: (check all that apply)</b><br><input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.  |          |   |          | <b>3. ADDITIONAL FEES</b><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: 8pt;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th></th> <th>Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>141</td><td>1,280</td><td>241</td><td>640</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>142</td><td>1,280</td><td>242</td><td>640</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143</td><td>460</td><td>243</td><td>230</td><td>Design issue fee</td><td></td></tr> <tr><td>144</td><td>620</td><td>244</td><td>310</td><td>Plant issue fee</td><td></td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>146</td><td>740</td><td>246</td><td>370</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td></tr> <tr><td>149</td><td>740</td><td>249</td><td>370</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr> <tr><td>179</td><td>740</td><td>279</td><td>370</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> </tbody> </table> |          |                          |  | Large Entity    |          | Small Entity |          |          | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) |     |     | 105                    | 130    | 205 | 65  | Surcharge - late filing fee or oath |     | 127                               | 50 | 227 | 25  | Surcharge - late provisional filing fee or cover sheet |     | 139                                   | 130 | 139 | 130 | Non-English specification |     | 147   | 2,520 | 147 | 2,520 | For filing a request for <i>ex parte</i> reexamination |    | 112   | 920* | 112  | 920* | Requesting publication of SIR prior to Examiner action |  | 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action |  | 115 | 110 | 215 | 55 | Extension for reply within first month |  | 116 | 400 | 216 | 200 | Extension for reply within second month |  | 117 | 920 | 217 | 460 | Extension for reply within third month |  | 118 | 1,440 | 218 | 720 | Extension for reply within fourth month |  | 128 | 1,960 | 228 | 980 | Extension for reply within fifth month |  | 119 | 320 | 219 | 160 | Notice of Appeal |  | 120 | 320 | 220 | 160 | Filing a brief in support of an appeal |  | 121 | 280 | 221 | 140 | Request for oral hearing |  | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding |  | 140 | 110 | 240 | 55 | Petition to revive - unavoidable |  | 141 | 1,280 | 241 | 640 | Petition to revive - unintentional |  | 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) |  | 143 | 460 | 243 | 230 | Design issue fee |  | 144 | 620 | 244 | 310 | Plant issue fee |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  | 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) |  | 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt |  | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) |  | 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) |  | 169 | 900 | 169 | 900 | Request for expedited examination of a design application |  |
| Large Entity   |          | Small Entity  |          |  | Fee Paid |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Fee Code   | Fee (\$) | Fee Code  | Fee (\$) |  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 105  | 130      | 205   | 65       | Surcharge - late filing fee or oath  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 127  | 50       | 227   | 25       | Surcharge - late provisional filing fee or cover sheet   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 139  | 130      | 139   | 130      | Non-English specification  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 147  | 2,520    | 147   | 2,520    | For filing a request for <i>ex parte</i> reexamination   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 112  | 920*     | 112   | 920*     | Requesting publication of SIR prior to Examiner action   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 113  | 1,840*   | 113   | 1,840*   | Requesting publication of SIR after Examiner action  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 115  | 110      | 215   | 55       | Extension for reply within first month   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 116  | 400      | 216   | 200      | Extension for reply within second month  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 117  | 920      | 217   | 460      | Extension for reply within third month   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 118  | 1,440    | 218   | 720      | Extension for reply within fourth month  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 128  | 1,960    | 228   | 980      | Extension for reply within fifth month   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 119  | 320      | 219   | 160      | Notice of Appeal   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 120  | 320      | 220   | 160      | Filing a brief in support of an appeal   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 121  | 280      | 221   | 140      | Request for oral hearing   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 138  | 1,510    | 138   | 1,510    | Petition to institute a public use proceeding  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 140  | 110      | 240   | 55       | Petition to revive - unavoidable   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 141  | 1,280    | 241   | 640      | Petition to revive - unintentional   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 142  | 1,280    | 242   | 640      | Utility issue fee (or reissue)   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 143  | 460      | 243   | 230      | Design issue fee   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 144  | 620      | 244   | 310      | Plant issue fee  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 122  | 130      | 122   | 130      | Petitions to the Commissioner  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 123  | 50       | 123   | 50       | Processing fee under 37 CFR 1.17(q)  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 126  | 180      | 126   | 180      | Submission of Information Disclosure Stmt  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 581  | 40       | 581   | 40       | Recording each patent assignment per property (times number of properties)   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 146  | 740      | 246   | 370      | Filing a submission after final rejection (37 CFR § 1.129(a))  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 149  | 740      | 249   | 370      | For each additional invention to be examined (37 CFR § 1.129(b))   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 179  | 740      | 279   | 370      | Request for Continued Examination (RCE)  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 169  | 900      | 169   | 900      | Request for expedited examination of a design application  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| <b>1. BASIC FILING FEE</b><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: 8pt;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr><td>101</td><td>770</td><td>201</td><td>385</td><td>Utility filing fee</td><td>385.00</td></tr> <tr><td>106</td><td>340</td><td>206</td><td>170</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>530</td><td>207</td><td>265</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>770</td><td>208</td><td>385</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr> </tbody> </table> <p style="text-align: right;"><b>SUBTOTAL (1)</b>      (\$385.00)</p>   |          |   |          | Large Entity   |          | Small Entity             |  | Fee Description | Fee Paid | Fee Code     | Fee (\$) | Fee Code | Fee (\$) |          |          | 101      | 770      | 201 | 385 | Utility filing fee     | 385.00 | 106 | 340 | 206                                 | 170 | Design filing fee                 |    | 107 | 530 | 207  | 265 | Plant filing fee                      |     | 108 | 770 | 208                       | 385 | Reissue filing fee                                |       | 114 | 160   | 214  | 80 | Provisional filing fee                                    |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Large Entity   |          | Small Entity  |          | Fee Description  | Fee Paid |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Fee Code   | Fee (\$) | Fee Code  | Fee (\$) |  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 101  | 770      | 201   | 385      | Utility filing fee   | 385.00   |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 106  | 340      | 206   | 170      | Design filing fee  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 107  | 530      | 207   | 265      | Plant filing fee   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 108  | 770      | 208   | 385      | Reissue filing fee   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 114  | 160      | 214   | 80       | Provisional filing fee   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: 8pt;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102</td><td>86</td><td>202</td><td>43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104</td><td>290</td><td>204</td><td>145</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>109</td><td>86</td><td>209</td><td>43</td><td>**Reissue independent claims over original patent</td><td></td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>**Reissue claims in excess of 20 and over original patent</td><td></td></tr> </tbody> </table> <p style="text-align: right;"><b>SUBTOTAL (2)</b>      (\$18.00)</p> <p style="font-size: 8pt;">** or number previously paid, if greater; For Reissues, see above</p> |          |   |          | Large Entity   |          | Small Entity             |  | Fee Description | Fee Paid | Fee Code     | Fee (\$) | Fee Code | Fee (\$) |          |          | 103      | 18       | 203 | 9   | Claims in excess of 20 |        | 102 | 86  | 202                                 | 43  | Independent claims in excess of 3 |    | 104 | 290 | 204  | 145 | Multiple dependent claim, if not paid |     | 109 | 86  | 209                       | 43  | **Reissue independent claims over original patent |       | 110 | 18    | 210  | 9  | **Reissue claims in excess of 20 and over original patent |      | Other fee (specify) _____<br>*Reduced by Basic Filing Fee Paid <b>SUBTOTAL (3)</b> \$0 |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Large Entity   |          | Small Entity  |          | Fee Description  | Fee Paid |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Fee Code   | Fee (\$) | Fee Code  | Fee (\$) |  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 103  | 18       | 203   | 9        | Claims in excess of 20   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 102  | 86       | 202   | 43       | Independent claims in excess of 3  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 104  | 290      | 204   | 145      | Multiple dependent claim, if not paid  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 109  | 86       | 209   | 43       | **Reissue independent claims over original patent  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 110  | 18       | 210   | 9        | **Reissue claims in excess of 20 and over original patent  |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| SUBMITTED BY   |          |   |          | Complete (if applicable)   |          |                          |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Name (Print/Type)  |          | Jay G. Durst  |          | Registration No. (Attorney/Agent)  |          | 41,723                   |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Signature  |          |  |          | Telephone  |          | (414) 225-6300           |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
|  |          |   |          | Date   |          | January 13, 2004         |  |                 |          |              |          |          |          |          |          |          |          |     |     |                        |        |     |     |                                     |     |                                   |    |     |     |  |     |                                       |     |     |     |                           |     |   |       |     |       |  |    |   |      |  |      |  |  |     |        |     |        |   |  |     |     |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |       |     |     |   |  |     |       |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Inventor(s): CUDDEBACK et al. Art Unit: 2851  
Serial No. Unassigned Examiner: David B. Gray  
For: *ENCLOSURE FOR WILDLIFE SURVEILLANCE SYSTEM AND SECURITY  
APPARATUS THEREFOR*

Continuation of Appl. Serial No. 10/237,642, filed September 9, 2002

**COVER LETTER FOR CONTINUATION APPLICATION  
AND RELATED PAPERS**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Enclosed in compliance with 37 CFR §1.53(b) and 37 CFR § 1.78, is the above-identified *continuation* application and related papers including: (1) a Utility Patent Application Transmittal form (Form PTO/SB/05), and (2) a Fee Transmittal form (Form PTO/SB/17).

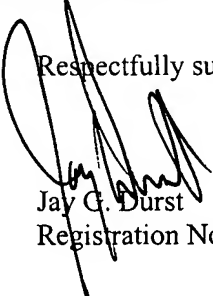
The text of this application differs from the text of the parent application Serial No. 10/237,642 only in that:

- (1) A "Cross-Reference to Related Application" section has been updated in this application to incorporate the necessary reference to the parent and grandparent applications; and
- (2) Claims 1-22 are new.

In light of the foregoing, continuation application status of this application under 37 CFR §1.53(b) and 37 CFR § 1.78, early consideration, and allowance of this application are believed to be in order and are respectfully requested.

The Director is hereby authorized to charge payment of any additional fees associated with this communication or credit any overpayment to Deposit Account No. 50-1170.

Respectfully submitted,

  
Jay G. Durst

Registration No. 41,723

Date: January 13, 2004

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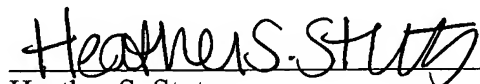
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